STATE OF VERMONT PUBLIC SERVICE BOARD

COMMERCIAL MOBILE RADIO SERVICE PROVIDER REGISTRATION FORM

In completing the registration form, a	pplicants shall provide the follo	owing information:
1. Name, as registered with the Verm	nont Secretary of State	
2. All names under which Company	is conducting business in Verm	ont
3. Applicant's principal business add	ress, telephone number, and e-r	nail address
	Address	
City or town	State	ZIP Code
Telephone number	e-mail address	
4. Contact person for this application	a, address, telephone number, an	nd email address
	Name	
	Address	
City or town	State	ZIP Code
Telephone number	e-mail address	3

5. Name, address, and tele than given in the response	phone number of person to receive and to item four	nual report forms, if different		
Name				
Telephone numbe	r			
6. Name, address and telep	phone number of registered agent in V	ermont		
	Name			
	Address			
City or town	State	ZIP Code		
Telephone numbe 7. A brief description of pro-	r oposed Vermont operations and services	<u> </u>		
	-r			

8. List the names and business addresses of current directors and officers.		
	Name and Position	
	Address	
City or town	State	ZIP Code
	Name and Position	
	Address	
City or town	State	ZIP Code
	Name and Position	
	Address	
City or town	State	ZIP Code

- 9. For changes in controlling interest as defined in 30 V.S.A. §107, on an attached sheet, describe the changes in ownership.
- 10. For the issuance of bonds, securities or other evidences of indebtedness as defined in 30 V.S.A. §108, on an attached sheet, describe in detail each proposed transaction.
- 11. For sales and leases as defined in 30 V.S.A. §109, on an attached sheet, describe the changes in ownership.

Attestation

	and that the information is corre	ect and complete
BY:		
[Officer] of O	Company or Designated Agent	
This document was sig	gned in my presence on the	day o
	, 20	